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PATENT  
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Practitioner's Docket No. D-1123

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **McGrady, et al.**

Application No.: 09/428,035 Art Unit: 3626  
Filed: October 27, 1999 Examiner: **Milan S. Kapadia**  
Title: **Method of Dispensing and Tracking the Giving of Medical Items to Patients**  
Confirmation No.: 4121

Commissioner for Patents  
Washington, D.C. 20231

**NOTICE OF APPEAL FROM THE PRIMARY EXAMINER  
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES  
(37 C.F.R. 1.191)**

Applicants hereby appeal to the Board from the decision of the Primary Examiner, mailed August 5, 2002, rejecting claims 1-28.

**1. STATUS OF APPLICANT**

This application is on behalf of other than a small entity.

**2. FEE FOR FILING NOTICE OF APPEAL**

Pursuant to 37 C.F.R. 1.17(b), the fee for filing the Notice of Appeal is:

Other than a small entity \$320.00

Notice of Appeal fee due \$320.00

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GROUP 3600

**CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))**

I hereby certify that, on the date shown below, this correspondence is being:

**MAILING**

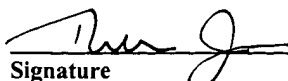
- ☒ deposited with the United States Postal Service with sufficient postage as Express mail in an envelope addressed to the Commissioner for Patents, Washington, D.C. 20231.

Express Mail Label No.: EV164068136US

Date: 10/28/02

**FACSIMILE**

- ☐ transmitted by facsimile to the Patent and Trademark Office.

  
Signature

Ralph E. Jocke  
(type or print name of person certifying)

10/30/2002 JADD01 00000071 100637 09428035  
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(Notice of Appeal from the Primary Examiner to the Board—page 1 of 2)



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**3. EXTENSION OF TERM**

The proceedings herein are for a patent application and the provisions of 37 C.F.R.1.136 apply.

Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

**4. TOTAL FEE DUE**

The total fee due is:

Notice of Appeal fee     \$320.00

**TOTAL FEE DUE     \$320.00**

**5. FEE PAYMENT**

Charge Deposit Account No. 10-0637 (WALKER & JOCKE) the sum of \$320.00

A duplicate of this transmittal is attached.

**6. FEE DEFICIENCY**

If any additional extension and/or fee is required, this is a request therefor and to charge Deposit Account No. 10-0637 (WALKER & JOCKE).

If any additional fee for claims is required, charge Account No. 10-0637 (WALKER & JOCKE).

  
SIGNATURE OF PRACTITIONER

Reg. No. 31,029  
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